

# 2025 Trail Creek Fall Festival

Vendor Intake Form for the 2025 Trail Creek Fall Festival  
Saturday, October 18th, 2025  
12pm to 4pm

For questions, please contact Katrina Vedo at:  
Email: katwerner89@gmail.com  
Phone/text: (219) 256-4144

**\* Indicates required question**

**Name (first and last name): \***

**Name of Business/ Organization/ Company: \***

**Website/ Social Media Page link (Optional):**

**Address: \***

**Phone: \***

**Email: \***

**List of the items to be sold: \***

*We reserve the right to deny if we have multiples of the same thing. We try to allow the full number possible and spread out so like items are not in close proximity. Only one Direct Sales/ MLM rep per company is permitted.*

**Will you be selling food items? \***

*If you are a food vendor, it is YOUR responsibility to contact the Laporte County Health Department to determine if you require a temporary food permit. <https://www.in.gov/localhealth/laportecounty/food-services/>*

YES / NO

**Do you require electricity? \***

*Access to electricity is limited and is on a first-come, first-served basis. You may need to bring your own power source.*

YES / NO

**What type of space do you need? \***

*Check one*

- Regular vendor space: \$20
- Food trucks/ boutique trailers: \$25
- Non-profit: Fee is waived!

**How much space do you need? \***

*Regular vendor spaces, please try to keep around 10x10. If you need something significantly larger, please state the reason.*

**Park Donation**

We kindly ask vendors to provide a gift basket or item that can be raffled off during the Silent Auction at the event. All proceeds will go to the Trail Creek Park Board which works to update and improve our parks and playgrounds. For vendors who prefer to donate money, please send or bring a check or cash to the Town of Trail Creek and clearly state that it is for a 'Park Board Donation'.

Trail Creek Town Hall  
211 Rainbow Trail  
Trail Creek, IN 46360

*Check one*

- Basket or item
- Check/money order or cash
- I do not want to donate to the Trail Creek Park Board.
- I have not decided yet

**Payment method\***

*Please submit the fee upon completion of your application. Send or visit:*

*Trail Creek Town Hall  
211 Rainbow Trail  
Trail Creek, IN 46360*

*Make checks/money orders to:*

*"The Town of Trail Creek" include note "Fall Fest Vendor"*

- Check/Money Order: (include check number under "Other" option below)
- Cash: Bring cash to Trail Creek Town Hall
- Non-profit (Fee is waived)
- Other:

### **Our Liability\***

The Town of Trail Creek, Parks and Recreation Board, assume **NO** responsibility for losses or injuries for any reasons.

*Below are the terms and conditions we expect all vendors to comply with:*

- 1. I understand that the Trail Creek Fall Festival is October 18, 2025, from 12pm-4pm CDT*
- 2. I understand that I will be responsible for bringing all items needed for my booth (including tables, chairs, electric cords, etc.)*
- 3. I understand as a vendor I MUST have my booth display set up by 11:45am CDT and will not tear down until 4pm, or unless instructed otherwise.*
- 4. I understand the festival organizers will use email, text, and/or Facebook messenger for communications.*
- 5. I understand Vendors are responsible for all applicable local and state taxes.*
- 6. I understand that my fee is not refundable if I cancel within 3 weeks of the festival.*
- 7. Checks need mailed to The Town of Trail Creek, with note stating "Fall festival Vendor"*
- 8. If I am a food vendor, I will be responsible for contacting the Laporte County Health Department in a timely manner to determine if I require a temporary food permit. I agree to follow The Laporte County Health department requirements. If I do not meet the requirements I may be shut down and the vendor fee will not be refunded. <https://www.in.gov/localhealth/laportecounty/food-services/>*

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**Email: [katwerner89@gmail.com](mailto:katwerner89@gmail.com)**

**Phone/text: (219) 256-4144**

***I have read and agree to the terms. (Typing your full name below acts as your signature) \****

**Signature: \***

**Today's date: \***